

**LOUISIANA UNDERGROUND STORAGE TANK  
WORKER CERTIFICATION EXAMINATION REGISTRATION FORM  
2004 TESTING SCHEDULE**

**--> IMPORTANT <--**

**An application (Form UST-CC-1) must be received by the Permits Division at least thirty (30) days prior to the testing date. This testing schedule form cannot be completed unless Form UST-CC-1 has been submitted to the Permits Division.**

Please check below for each test you wish to take.

<b>Thursday, February 5, 2004</b>	Installation/Repair Exam - 8:30 am	Closure Exam - 1:00 pm
<b>Thursday, April 1, 2004</b>	Installation/Repair Exam - 8:30 am	Closure Exam - 1:00 pm
<b>Tuesday, June 1, 2004</b>	Installation/Repair Exam - 8:30 am	Closure Exam - 1:00 pm
<b>Tuesday, August 3, 2004</b>	Installation/Repair Exam - 8:30 am	Closure Exam - 1:00 pm
<b>Tuesday, October 5, 2004</b>	Installation/Repair Exam - 8:30 am	Closure Exam - 1:00 pm
<b>Thursday, December 2, 2004</b>	Installation/Repair Exam - 8:30 am	Closure Exam - 1:00 pm

**IF THE FEE OF \$132 PER EXAMINATION HAS NOT BEEN REMITTED,  
IT MUST ACCOMPANY THIS FORM.**

**I understand that should I need to cancel the scheduled testing, I must notify the Permits Division no later than one week (7 days) prior to the scheduled testing date. I will be ineligible for reimbursement of the examination fee if I fail to cancel the scheduled testing in this timely manner.**

**Check here if you are taking this examination to recertify.**

\_\_\_\_\_  
Signature of Individual to be Tested

\_\_\_\_\_  
Telephone Number (Please Include Area Code)

\_\_\_\_\_  
Name of Individual to be Tested (PLEASE PRINT)

\_\_\_\_\_  
Fax Number (Please Include Area Code)

\_\_\_\_\_  
Name of Employer

\_\_\_\_\_  
Employer's Address

**RETURN THIS FORM TO THE PERMITS DIVISION, POST OFFICE BOX 4313, BATON ROUGE, LA 70821-4313.**